

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	AB		12-03-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	12-14-01
FORMALITY REVIEW	TA	1113	12-18-01
RESPONSE FORMALITY REVIEW	gph	1030	3-22-02

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	0
10	0
11	0
12	0
13	0
14	✓
15	✓
16	✓
17	✓
18	✓
19	✓
20	✓
21	✓
22	0
23	✓
24	✓
25	✓
26	✓
27	✓
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36	✓
37	✓
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39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	
51	✓
52	✓
53	✓
54	✓
55	✓
56	✓
57	✓
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Claim	Date
Final Original	
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If more than 150 claims or 10 actions
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Best Available Copy

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12/19/04